FEC FORM 2 STATEMENT OF CANDIDACY

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2018 APR 17 AM 10: 28

(a) Name of Candidate (in full) MANCHIN, JOE, , , III				
(b) Address (number and street) 1668 FAIRMONT AVENUE	☐ Check if address chan	ged	Candidate's FEC Identification Number S0WV00090	
(c) City, State, and ZIP Code	•			nended
FAIRMONT	WV 2	26554	Statement (N) OR (A))
. Party Affiliation	5. Office Sought		trict of Candidate	
DEMOCRATIC PARTY	Senate	WV	00	
DE	SIGNATION OF PRINCIP	AL CAMPAIG	N COMMITTEE	
. I hereby designate the following na	med political committee as my Princ	ipal Campaign Com	mittee for the 2018 election(s). (year of election)	
	filed with the appropriate office listed	in the instructions.		
(a) Name of Committee (in full)				
MANCHIN FOR WE	EST VIRGINIA			
(b) Address (number and street) PO BOX 5202				
(c) City, State, and ZIP Code				<u>-</u>
		WV	25361	
	ESIGNATION OF OTHER A (Including Joint Funda med committee, which is NOT my pr	AUTHORIZED raising Representati		of my
DE 3. I hereby authorize the following naticandidacy.	' (Including Joint Fund	AUTHORIZED raising Representati	ves)	of my
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I hereby authorize the following naticandidacy. NOTE: This designation should be (a) Name of Committee (in full) MANCHIN VICTOF (b) Address (number and street) PO BOX 11926 (c) City, State, and ZIP Code CHARLESTON I certify that Have ex	(Including Joint Funding)	AUTHORIZED raising Representati incipal campaign co nmittee.	wes) mmittee, to receive and expend funds on behalf 25339 and belief it is true, correct and complete.	of my
I hereby authorize the following naticandidacy. NOTE: This designation should be (a) Name of Committee (in full) MANCHIN VICTOF (b) Address (number and street) PO BOX 11926 (c) City, State, and ZIP Code CHARLESTON I certify that Have ex	(Including Joint Funding)	AUTHORIZED raising Representati incipal campaign co nmittee.	wes) mmittee, to receive and expend funds on behalf 25339 and belief it is true, correct and complete.	of my
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FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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Page	20	f ²

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	IN MO MT WV VICTORY FUND							
	(b) Address (number and street) 918 PENNSYLVANIA AVE SE							
	(c) City, State, and ZIP Code							
	WASHINGTON	DC .	20003					
	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	SENATE 2018 IMPACT							
	(b) Address (number and street) 918 PENNSYLVANIA AVE SE							
	(c) City, State, and ZIP Code		-					
	WASHINGTON	DC	20003					
c	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. a) Name of Committee (in full) DEMOCRATS FOR OPPORTUNITY FUND							
	(b) Address (number and street) 1751 POTOMAC GREENS DRIVE	<u> </u>						
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Commutee (in rull)							
				11.12				
	(b) Address (number and street)							

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PHONE(202) 224-0322

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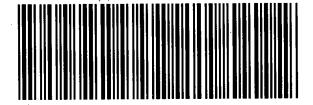
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